



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Akiyo YAMADA et al.

Appl'n No.: 10/031,331

Filed: January 18, 2002

For: ENVIRONMENTAL STRESS
TOLERANT GENE

Art Unit: 1638

Examiner: Medina Ahmed Ibrahim

Attorney Docket No.: 31671-176817

Customer No.

26694

PATENT TRADEMARK OFFICE

AMENDMENT

Mail Stop: Amendments
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of October 21, 2005, please enter the following amendments and consider the following remarks. Should any fees be necessary, please charge such fees or credit any refund to our Deposit Account No. 22-0261.

Claim amendments begin on page 2.

Remarks begin on page 5.



TFW

USE IN LIEU OF PTO/SB/17 (11-04)
Reflects USPTO filing fees in effect from 12/___/04

FEE TRANSMITTAL For FY 2005 <i>(Reflects USPTO filing fees in effect from 12/08/04)</i>				Complete if Known																																																																			
<div style="border: 1px solid black; padding: 5px;"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div> <div style="border: 1px solid black; padding: 5px;">TOTAL AMOUNT OF PAYMENT (\$) 0</div>				Application Number		10/031,331																																																																	
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				First Named Inventor		Akiyo YAMADA et al.																																																																	
				Examiner Name		M. Ibrahim																																																																	
				Art Unit		1638																																																																	
				Attorney Docket No.		31671-176817																																																																	
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																			
<div style="border: 1px solid black; padding: 5px;"><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> None Deposit Account Number: <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: center;">22-0261</div> Deposit Account Name: <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: center;">Venable LLP</div> The Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments to the above-identified deposit account. <input type="checkbox"/> Other (please identify): _____</div>				2. EXTRA CLAIM FEES																																																																			
				<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="text-align: left;">Fee Description</th><th style="text-align: right;">Fee (\$)</th><th style="text-align: right;">Small Entity Fee (\$)</th></tr></thead><tbody><tr><td>Each claim over 20</td><td style="text-align: right;">50</td><td style="text-align: right;">25</td></tr><tr><td>Each independent claim over 3</td><td style="text-align: right;">200</td><td style="text-align: right;">100</td></tr><tr><td>Multiple dependent claims</td><td style="text-align: right;">360</td><td style="text-align: right;">180</td></tr><tr><td>For Reissues, each claim over 20 and more than in the original patent</td><td style="text-align: right;">50</td><td style="text-align: right;">25</td></tr><tr><td>For Reissues, each independent claim more than in the original patent</td><td style="text-align: right;">200</td><td style="text-align: right;">100</td></tr><tr><td colspan="3">Total Claims</td></tr><tr><td style="text-align: right;">- 20 =</td><td style="text-align: right;">0</td><td style="text-align: right;">x 50 = 0.00</td></tr><tr><td colspan="3">Indep. Claims</td></tr><tr><td style="text-align: right;">- 3 =</td><td style="text-align: right;">0</td><td style="text-align: right;">x 200.00 = 0.00</td></tr><tr><td colspan="3">Multiple Dependent Claims</td></tr><tr><td></td><td style="text-align: right;">180.00</td><td></td></tr><tr><td colspan="3" style="text-align: right;">Subtotal (2) \$</td></tr></tbody></table>				Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	50	25	Each independent claim over 3	200	100	Multiple dependent claims	360	180	For Reissues, each claim over 20 and more than in the original patent	50	25	For Reissues, each independent claim more than in the original patent	200	100	Total Claims			- 20 =	0	x 50 = 0.00	Indep. Claims			- 3 =	0	x 200.00 = 0.00	Multiple Dependent Claims				180.00		Subtotal (2) \$																											
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SUBMITTED BY																																																																							
Signature		Registration No. 36,830		Telephone (202) 344-4000																																																																			
Name (Print/Type) Ann S. Hobbs, Ph.D.				Date January 23, 2006																																																																			